Notification of Hazardous Waste Site

United States Environmental Protection Agency Washington DC 20460

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Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

Pub. Aff. 82

		_#	IGH MAZARO- 13140KS	000 001 032)
A	Person Required to Notify:	Name Owens-Corr	ning Fiberglas Corporation	on
	Enter the name and address of the pe or organization required to notify.			
		City Toledo	State	Ohio Zip Code 43659
-	Site Location:	No. of Co.	Coming Fibonales Compa	action
	Enter the common name (if known) are actual location of the site.	id ————	Name of Site Owens-Corning Fiberglas Corporation	
		Street Old F	ortland Road	
		City St. Helens	County State	OR Zip Code 97051
	Person to Contact:		Udilden I Verente Por	
	Enter the name, title (if applicable), are business telephone number of the per	rson	William L. Kreutz, Esc (419) 248-8220	quire
	to contact regarding information submitted on this form.	Phone	(419) 240-0220	
	Dates of Waste Handling:			
	Enter the years that you estimate was	te.		
	treatment, storage, or disposal began ended at the site.		From (Year) 1930 To (Year) Present	
	Option I: Select general waste types you do not know the general waste ty encouraged to describe the site in Item	and source categories. If pes or sources, you are	Option 2: This option is available Resource Conservation and Recregulations (40 CFR Part 261).	ole to persons familiar with the covery Act (RCRA) Section 300
	Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.	urce of Waste: ce an X in the appropriate ces.	Specific Type of Waste: EPA has assigned a four-digit relisted in the regulations under appropriate four-digit number in the list of hazardous wastes and contacting the EPA Region services.	Section 3001 of RCRA. Enter to in the boxes provided. A copy of id codes can be obtained by
		☐ Mining ☐ Construction		
		☐ Textiles		
		□ Fertilizer		
		□ Paper/Printing		
		☐ Leather Tanning		
		☐ Iron/Steel Foundry		
		☐ Chemical, General		
		☐ Plating/Polishing		
		☐ Military/Ammunition		
		☐ Electrical Conductors		
	12.	☐ Transformers		
		☐ Utility Companies		
		☐ Sanitary/Refuse	PEASINED	
		☐ Photofinish	r Elective II	
	16.	☐ Lab/Hospital		
		□ Unknown	JUN 1 5 '81	
		XXOther (Specify)		
	Mi	g. Wood Fiber	able state	17 - 28 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
	D,	toducto	FOX Street	USEPA SF

Form Approved OMB No. 2000-0138 EPA Form 8900-1



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Notification of Hazardous Waste Site	Side Two		
Waste Quantity:	Facility Type	Total Facility Waste Amount	
Place an X in the appropriate boxes to indicate the facility types found at the site.	Piles In the property of the propert	See site description (Section I)	Y
In the "total facility waste amount" space give the estimated combined quantity	3. Landfill Tanks	gallons	
(volume) of hazardous wastes at the site using cubic feet or gallons.	5. Impoundment	Total Facility Area	
In the "total facility area" space, give the estimated area size which the facilities	6. Underground Injection	See site description b	elo
occupy using square feet or acres.	7. ☐ Drums, Above Ground 8. ☐ Drums, Below Ground	acres (Section I)	
	9 XX Other (Specify) Wastewater	Treatment	
Known, Suspected or Likely Releases to	the Environment:		
Place an X in the appropriate boxes to indicate a or likely releases of wastes to the environment.	any known, suspected,	Known ☐ Suspected XX Likely ☐ No	one
Note: Items Hand I are optional. Completing th hazardous waste sites. Although completing the	ese items will assist EPA and State and I ie items is not required, you are encourag	ocal governments in locating and assessed to do so.	sing
Sketch Map of Site Location: (Optional)			
Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.	P.		
	•		
		, ••	
Description of City (Our set)		·	_
Description of Site: (Optional) Describe the history and present			
conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.	Information on the hazardou St. Helens Plant is quite a small amounts of various cheen used at the Plant over entered the water systems a process or intentional discontinuous treatment operation would a	sketchy. There were apparent memical materials which have the years that may have through the fabrication tharge. The wastewater	
for eventual reuse as process mak Bay where it is regulated by an N disposed of within the approval o	e-up water or it would be dis .P.D.E.S. permit. Sludge fro	scharged to the Scappose om the lagoon has been	
Signature and Title:			
The person or authorized representative (such as plant managers, superintendents.	william L. Kreutz, Esquire	Owner, Present	
trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address	Owens-Corning Fiberglas Co Fiberglas Tower	rporation	

City

in item A). For other persons providing notification, the signature is optional Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

Toledo

☐ Operator, Past □ Other

State Ohiozp Code 43659

🕱 Operator, Present

High HAZARd
New Eite
ATTACHMENT II

SCORE <u>N7 (757</u> 0)	
REVIEWED BY: FIT	
D . C	

TACHMENT II

SITE NAME: Owens - C St. Helens	orning Fibera	Jass Corporation
IS THIS SITE ON UHWS LOG	? .	
YES	NO	UNKNOWN
IF YES, IS THIS DATA CON	SISTENT WITH UHWS	DATA?
A) YES		
B) NO (IF NO, EXP	PLAIN)	
B) DOES UHWS SHOW SITE(S) NOT DISCLOSED 8	Y OWNER?
YES(PROVIDE D	DETAILS)	
NO		:
C) DOES ONNER LIST SITE	ES NOT DISCLOSED TH	HRU UHWS INVESTIGATION?
YES(PROVIDE DE	ETAILS)	

COMMENTS/SUGGESTIONS FOR FURTHER ACTION (IF ANY)

ান্ত্রা প্রতিষ্ঠা প্রতিষ্ঠা কর্মার পুর্বাধ্য পর্য একর্মার্ক্ত্রার স্থান্তর প্রতিষ্ঠানিক বিশ্বর প্রতিষ্ঠানিক ব বিশ্বর বিশ্বর বিশ্বর বিশ্বর প্রতিষ্ঠানিক বিশ্বর প্রকর্মার বিশ্বর প্রতিষ্ঠানিক বিশ্বর বিশ্বর বিশ্বর বিশ্বর বিশ্বর

Waste (#10, assume 1,2 SCCRE: Volume (known / unknown Sensitive Release 102

(possible leachate from treatment Bonus Points (15)
system over long period of time) TOTAL 117 (75%) HIGH HAZARd